Vita signs Market Signs July 2012

Prescription Painkiller Overdoses

Use and abuse of methadone as a painkiller

Prescription painkiller overdoses* were responsible for more than 15,500 deaths in 2009. While all prescription painkillers have contributed to an increase in overdose deaths over the last decade, methadone has played a central role in the epidemic. More than 30% of prescription painkiller deaths involve methadone, even though only 2% of painkiller prescriptions are for this drug. Six times as many people died of methadone overdoses in 2009 than a decade before.

Methadone has been used safely and effectively to treat drug addiction for decades. It has been prescribed increasingly as a painkiller because it is a generic drug that can provide long-lasting pain relief. But as methadone's use for pain has increased, so has nonmedical use of the drug and the number of overdoses.

* "Prescription painkiller overdoses" refers to deaths from using harmful amounts of opioid or narcotic pain relievers, including drugs such as Vicodin (hydrocodone), OxyContin (oxycodone), Opana (oxymorphone), and methadone.

→ See page 4
Want to learn more? Visit

w http://www.cdc.gov/vitalsigns

1 in 3

Methadone contributed to nearly 1 in 3 prescription painkiller deaths in 2009.

5,000

About 5,000 people die every year of overdoses related to methadone.

† ††††† 6x

Six times as many people died of methadone overdoses in 2009 than a decade before.

National Center for Injury Prevention and Control

Division of Unintentional Injury Prevention



Methadone use poses risks

Problem

Methadone is frequently prescribed for pain.

- Methadone, like other painkillers, is commonly prescribed for chronic problems like back pain even though it might not help these problems in the long run.
- More than 4 million methadone prescriptions were written for pain in 2009, despite US Food and Drug Administration warnings about the risks associated with methadone.
- Methadone is available as a low-cost generic drug. It is often listed as a preferred drug by insurance companies.

Methadone's risks include:

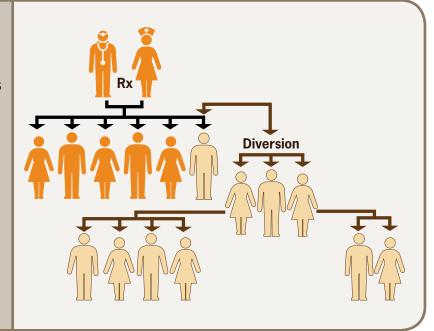
- The difference between appropriate prescribed doses and dangerous doses of methadone is small.
- Methadone has special risks as a painkiller. For example, taking it more than 3 times a day can cause the drug to build up in a person's body, leading to dangerously slowed breathing.
- ♦ Methadone can seriously disrupt the heart's rhythm.
- Methadone can be particularly risky when used with tranquilizers or other prescription painkillers.
- In one study, four in ten overdose deaths involving single prescription painkillers involved methadone, twice as many as any other prescription painkiller.

Why have methadone overdoses increased?

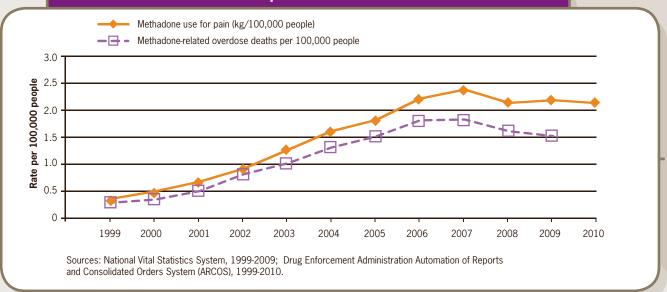
As methadone prescriptions have increased, so have the number of methadone overdoses. But many people who die of painkiller overdoses don't have a prescription. How can this be?

It's because some of these prescriptions are illegally sold or given to people who use them for nonmedical reasons. This is known as diversion.

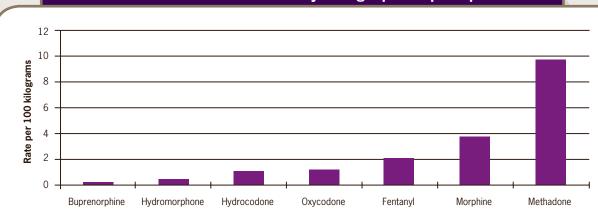
Diversion is a major factor in the prescription drug abuse epidemic. More careful prescribing will help reduce diversion and save lives.



Growth of methadone use for pain and methadone overdoses

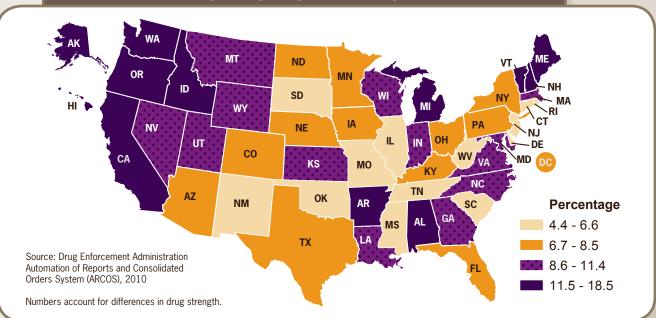


Death rate from overdoses caused by a single prescription painkiller



Source: Substance Abuse and Mental Health Services Administration, Center for Behavioral Statistics and Quality, Drug Abuse Warning Network Medical Examiner Component, 2009.

Methadone's share of prescription painkillers dispensed in each state



What Can Be Done



The US government is

- Enforcing federal laws to prevent nonmedical use of methadone.
- Educating health care providers and consumers about the correct use of methadone.
- ♦ Tracking prescription drug overdose trends and the impact of efforts to stop overdoses.



States can

- Develop and promote the use of safe prescribing guidelines for methadone.
- Support the use of methadone as a treatment for opioid dependence in opioid treatment programs.
- Use prescription drug monitoring programs to identify patients who are using methadone or other prescription painkillers for nonmedical purposes.



Health care providers can

- Follow guidelines for prescribing methadone and other prescription painkillers correctly, including
 - Screening and monitoring for substance abuse and mental health problems.
 - Prescribing only the quantity needed based on the expected length of pain.
 - Using prescription drug monitoring programs to identify patients who are misusing or abusing methadone or other prescription painkillers.
 - Monitor patients on high doses for heart rhythm problems.
 - Educating patients on how to safely use, store, and dispose of methadone and how to prevent and recognize overdoses.

Health insurers can



- Evaluate methadone's place on preferred drug lists.
- Consider strategies to ensure that pain treatment with any dose higher than 30 mg of methadone a day (the recommended maximum daily starting dose) is appropriate.

Individuals can



- Use methadone only as directed by a health care provider.
- Make sure they are the only ones to use their methadone and never sell or share it with others.
- Store methadone in a secure place and dispose of it properly. See www.cdc.gov/ HomeandRecreationalSafety/Poisoning/ preventiontips.htm for correct storage and disposal of medications.
- Get help for substance abuse problems 1-800-662-HELP or www.samhsa.gov/treatment/.

For more information, please contact

Telephone: 1-800-CDC-INFO (232-4636)

TTY: 1-888-232-6348 E-mail: cdcinfo@cdc.gov

Web: www.cdc.gov

Centers for Disease Control and Prevention 1600 Clifton Road NE, Atlanta, GA 30333 Publication date: 07/03/2012

www 🍃

http://www.cdc.gov/vitalsigns

www

http://www.cdc.gov/mmwr